

Name of Meeting: Patient Participation Group Meeting			
Meeting date	07/06/2015	Minutes reference	No.7
Special provisions	None		



Attendance

Oluchi Uduku	OU(Chair)
Ngozi Uduku	NU
Barbara Veale	BV
Ngozi Okafor	NO
O Mosaku-Thompson	OM
Evelyn Jeremy	EJ
Alan Metherell	AM
Clifton Hunnigan	CH
Salom Kyere	SK
Mel Nohur	MN
Nneka Anyanwagu	NA
Odunayo Oluwadare	OO (Minutes)

Apologies

Susan Vidal	SV
Neeta Patel	NP
Bridget Prentice	BP
Nina Wild	NW
Adetayo Adeola	AA
Judith Farrel	JF

1	INTRODUCTIONS	Action
1.1	Attendees introduced themselves	Note
2	Apologies	
2.1	Susan Vidal SV Neeta Patel NP Bridget Prentice BP Nina Wild NW Adetayo Adeola AA Judith Farrel JF	Note
3	Presentation/Talk	
3.1	The NHSE Primary Care infrastructure Fund Bid was successful and NHSE has awarded the surgery 66% of the cost of the works subject to the Lifestyle Suite being omitted and agreement being given by Lewisham CCG. Woodlands Health Centre is one of only 2 practices to be granted this money for expansion. OU explained what areas would be built upon and the changes that would be made to the waiting area. The area where Apple and Cherry currently exist will be extended and converted from 2 to 5 consulting rooms. There will be a new upper floor which will include a Teaching/Seminar room,	

	administrative offices and a toilet. The current waiting room will be enlarged, and space reallocation will take place around the reception area to accommodate the practices growing list size.	Note
3.2	The Surgery was rated 2 nd best in Lewisham for QOF this past year and are moving in the right direction.	Note
3.3	The number of complaints being received has decreased and the surgeries rating has gone up.	Note
3.4	The phlebotomy service has become very successful with sessions always being fully booked. AM enquired whether this was by appointment only or whether patients could walk-in. NU informed all that at present it is by appointment only. A WHC healthcare assistant is currently being trained to carry out phlebotomy services and the surgery intends to expand this service to 5 days a week in future.	Note
3.5	KG will soon be extending the family planning service the surgery provides by carrying out coil and implant insertions.	Note
3.6	NU and OU discussed with attendees the government's plan to merge surgeries and for practices to work more collaboratively. The plan is for surgeries to be open from 8am to 8pm 7 days a week. The government would like surgeries to rotate these hours. BV questioned whether the idea of minimal practices being in one borough was accurate. NU explained it is ideal for the government but not the GP practices nor the patients.	Note
3.7	NU mentioned that the flu season is about to commence and as a result the nurses and HCAs will be working overtime to compensate for this. Nurses will hold Saturday morning flu clinics commencing the first week in October from the hours of 8am-11am. OM queried whether this would be a walk-in clinic? OU reassured the meeting that nurses will have walk-in and pre-bookable appointments. EJ believed that in order for this to work early advertising is important. OU will create sessions where one nurse will see patients as normal and the other nurse will see patients for QOF.	Note
4	Discussion on additional improvements to be made at the practice	
4.1	NU believed that the phone system is unsatisfactory and gave an example of a patient who was waiting for 45 minutes for a call to be answered. BV suggested possibly establishing that in the mornings phone calls should be reserved for emergencies only and that other queries should be left until after midday when phones lines tend to be less busy.	Note
4.2	BV believed the best way to notify patients of such changes would be to display a practice website announcement stating that phone calls should not be made during certain times of the day except in an emergency. OU informed the group that Staff are also being trained to keep phone calls to a maximum of 3 minutes. EJ felt that the surgery should not rely too much on patients booking appointments via the internet because there are patients who do not use online services and these patients will prefer to phone the practice for	

<p>4.3</p>	<p>appointments. OU confirmed she is currently analysing the different reasons patients call up the surgery. EJ felt that there needs to be staff on standby to help patients who are unfamiliar with the self-check-in kiosk, as it is a very useful resource in saving receptionists' time, however not all patients utilise the kiosk.</p> <p>In response to recent complaints about waiting times OU is considering the "One appointment, One problem, 10 minutes policy" in order to reduce waiting times. CH believed that this concept could be effective timewise if worded differently. EJ believed that patients should be educated not to wait till their problems worsen before attending surgery because consultations then take longer.</p> <p>BV felt that the surgery should provide a leaflet to new patients informing them of what happens in WHC. OM understood that there are instances where doctors cannot keep to time because of emergencies etc. but she suggested that in these cases a message should be put up on the Jay-ex board informing patients so that they will not feel uninformed. Another way OU is trying to reduce waiting times is by training administrative staff to be able to do some of the clinicians admin work to save them having to do it in or between their consultations. This will enable doctors conclude consultations quicker.</p> <p>OM did not believe 10 minutes is a realistic time for some consultations because different patients vary in their needs and she used an example of patients requiring interpreters to demonstrate this. OU confirmed that additional time is set aside for such consultations.</p>	<p>Note</p> <p>Note</p> <p>Note</p> <p>Note</p>
<p>5</p>	<p>NAPP (National Association for Patient Participation)</p>	
<p>5a</p>	<p>The role of the PPG is to allow patients have a voice. PPG's can:</p> <ul style="list-style-type: none"> • offer feedback on the patient perspective • help practices make the most effective use of their resources • improve communication • help promote good health • influence decisions about which services are provided; and • offer practical support to the practice <p>With reference to the "Starting and Sustaining Successful PPGs" Guide issued at the last meeting it was agreed that this PPG now needed to elect a chair, secretary and treasurer and agree the Terms of Reference and other issues relating to the smooth running of the group. All agreed that the group needed to become more structured.</p> <p>AM believed that the booklet was very useful. The contents of the Guide were discussed and it was decided that a single meeting should be dedicated to this issue as it very broad. For that particular meeting it would be good if a wider range of patients were to attend. It may help to alter the date and time of the meeting to cater to more patients; possibly a Friday evening. EJ also suggested promoting the meeting with balloons and banners.</p>	<p>Note</p>

6	Joining us today: Dr. Uduku to answer any general clinical queries and give a clinical talk.	
	Will be addressed in next meeting	
7	Relationship with the Lewisham CCG (B Veale)	
7.1	<p>NU is a member of the CCG and attends 2 different meetings a month and is also a part of the prescribing board. BV just wanted to know how involved WHC is with the CCG because the NHS seems to be heading towards the privatisation route and BV felt that the NHS should be the primary care provider; NU agreed with this statement but added that the reason for this occurrence is increasingly long waiting lists.</p> <p>BV felt that Lewisham community does not agree with a lot of what the NHS is implementing. EJ advised BV to take her concerns to a higher level in order to make her argument more effective. BV talked about the strains Lewisham Hospital was under and gave examples of the recent event where Lewisham had a 95% bed occupancy when the maximum ought to be 85%.</p>	<p>Note</p> <p>Note</p>
8	AOB	
	Nothing to discuss	
9	Date of Next Meeting	
	Monday 7 December 2015 6:30pm at Woodlands Health Centre	